FORM D

## SEC **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION rocessing Washington, D.C. 20549 Section

FORM D

MARSI MILL

3235-0076 OMB Number: Expires: April 30, 2008 Estimated average burden hours per response..... 16



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. Washington, DC; SECTION 4(6), AND/OR <100 UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Tradewinds International Equity Portfolio	
Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 ☒ Rule 506  Type of Filing: □ New Filing ☒ Amendment	☐ Section 4(6) ☐ ULOE
7A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (X check if this is an amendment and name has changed, and indicate change.)	
The Tradewinds Institutional Investment Trust	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2049 Century Park East, 20 <sup>th</sup> Floor, Los Angeles, CA 90067  Address of Principal Business Operations (Number and Street, City, State, Zip Code)	(310) 712-4000 Telephone Number (Including Area Code)
(if different from Executive Offices)	Telephone (value) (metading rived code)
Brief Description of Business	
Investment fund	
Type of Business Organization	Dran
corporation limited partnership, already formed other (please specify):	BEST AVAILABLE CO
Actual or Estimated Date of Incorporation or Organization:   08     05     Actual	☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for S	
CN for Canada; FN for other foreign jurisdiction)	·
GENERAL INSTRUCTIONS	
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
77d(6)  When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A	notice is deemed filed with the U.S. Securities and
Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below of	or, if received at that address after the date on which it is
due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2054	9 -id-
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually a photocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not manually signed most be
Information Required: A new filing must contain all information requested. Amendments need only report	the name of the issuer and offering, any changes thereto, the
information requested in Part C, and any material changes from the information previously supplied in Parts	A and B. Part E and the Appendix need not be filed with
the SEC.	
Filing Fee: There is no federal filing fee. State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales	of securities in those states that have adopted ULOE and
that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Admini	strator in each state where sales are to be, or have been
made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the payment	
be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part	of this notice and must be completed.
ATTENTION	

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



A. BASIC IDENTIFI	CATION DATA		
2. Enter the information requested for the following:			
Each promoter of the issuer, if the issuer has been organized within	the past five years;		
<ul> <li>Each beneficial owner having the power to vote or dispose, or dire of the issuer;</li> </ul>	ct the vote or disposition of, 1	0% or more of a cla	ss of equity securities
Each executive officer and director of corporate issuers and of corp	porate general and managing p	partners of partnersh	ip issuers; and
Each general and managing partner of partnership issuers	•	,	
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	☐ General and/or
Managing Partner			
Full Name (Last name first, if individual)			
Hechmer, Paul J.			
Business or Residence Address (Number and Street, City, State, Zip Code) 2049 Century Park East, 20 <sup>th</sup> Floor, Los Angeles, CA 90067			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	□ General
and/or Managing Partner			
Full Name (Last name first, if individual)  Tradewinds Global Investors, LLC			
Business or Residence Address (Number and Street, City, State, Zip Code)			
2049 Century Park East, 20th Floor, Los Angeles, CA 90067			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	☐ General
and/or Managing Partner			
Full Name (Last name first, if individual)			
Mendez, Michael C.	<del></del>		·
Business or Residence Address (Number and Street, City, State, Zip Code) 2049 Century Park East, 20th Floor, Los Angeles, CA 90067			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	☐ General
and/or Managing Partner			
Full Name (Last name first, if individual)			-
Iben, David B.			
Business or Residence Address (Number and Street, City, State, Zip Code)			
2049 Century Park East, 20 <sup>th</sup> Floor, Los Angeles, CA 90067			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	☐ Director	☐ General
and/or Managing Partner	<del></del>		<del></del>
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that Apply:  Promoter Beneficial Owner and/or Managing Partner	☐ Executive Officer	Director	☐ General
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. IN	FORMA	TION AB	OUT OF	FERING			
l.	Has the	issuer sol	d or does	the issuer	intend to s	ell, to nor	-accredite	d investor	s in this o	ffering?	☐ Yes	⊠ No
unswer	also in A	ppendix, (	Column 2,	if filing u	nder ULO	E						
-	What is	the minin	num inves	tment that	will be ac	cepted fro	om any inc	dividual?	000,000	<u> </u>		
	Does th	e offering	permit jo	int owners	hip of a si	ngle unit?	⊠ Yes	□ No				
ı	Enter th	e informa	ition reque	sted for ea	ach person	who has	been or wi	ill be paid	or given,	directly or	indirectly	, any commission or similar
mune	ration for	solicitatio	n of purch	asers in co	onnection	with sales	of securit	ies in the c	offering, I	f a person	to be liste	d is an associated person or
gent of	f a broker	or dealer	registered	with the S	EC and/or	with a sta	ate or state	s, list the	name of th	e broker o	or dealer.	If more than five (5) person
bc lis	sted are as	sociated p	ersons of	such a bro	ker or dea	ler, you m	ay set fort	h the info	rmation fo	r that brok	er or deal	er only.
uli Nan	ne (Last na	me first, if	individual)									
usines	s or Reside	nce Addre	ess (Numbe	er and Stree	et, City, St	ate, Zip Co	ode)					
ame o	f Associate	d Broker	or Dealer								· · · · · · · · · · · · · · · · · · ·	
tales in	n Which Pe	rson Liste	d Has Soli	cited or Int	ends to So	licit Purch	asers				<del>-</del>	
			individual							*************		All States
AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]]	[ID]
L]	[IN]	[A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	(MI)	[MN]	[MS] [OR]	[MO] [PA]
νТ] {[]	(NE) {SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	(OH) [WV]	[OK] [WI]	[WY]	[PR]
			individual)		<u> </u>							
Busines	s or Reside	ence Addre	ess (Numbe	er and Stre	et, City, St	ate, Zip Co	ode)					
lame o	f Associate	ed Broker	or Dealer								_	
			d Has Soli		ends to So	licit Purch	asers					All States
ALI	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
IL)	(IN)	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M]	[MN]	[M\$]	(MO)
мтј	[NE]	[NV]	[NH]	[נא]	[MM]	[NY]	[NC]	[ND]	[он]	(ok)	[OR]	[PA]
RIJ	[SC]	[SD]	(TN)	[XX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ull Nar	ne (Last na	me first, if	individual)									
usines	s or Reside	nce Addre	ss (Numbe	er and Stre	et, City, St	ate, Zip Co	ode)					
											<u>.</u>	
lame o	f Associate	ed Broker	or Dealer									
			d Has Soli individual					*************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			All States
ΛLI	IAKI	[AZ]	[AR]	[CA]	[CO]	ICTI	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
L]	[IN]	[IA]	[KS]	(KY)	[LA]	[ME]	[MD]	[MA]	(MI)	[MN]	[MS]	[MO]
ΜŤ]	(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
RII	isci	[CD1	ITNI	ITXI	(UT)	ÍVTI	ľVAI	(WA)	(WV)	(WI)	(WY)	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

<sup>\*</sup>may be waived

	C. OFFERING PRICE, NO. OF INVESTORS, EXPENSES AND U	SE OF PROCEEDS	
offe	Enter the aggregate offering price of securities included in this offering and the total ount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange ering, check this box \(\Begin{align*}\) and indicate in the column below the amounts of the securities offered exchange and already exchanged.	·	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debi		S
	Equity	\$300,000,000	\$ 233,648,651
	☐ Common ☐ Preferred	\$	\$
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	S
	Other (Specify:	<u>s</u>	\$
	Total	\$300,000,000	\$233,648,651
2.	Answer also in Appendix, Column 3, if filing under ULOE  Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar - Amount of Purchases
	Accredited Investors	18	\$233,648,651
	Non-accredited Investors	0	\$0
	Total (for filing under Rule 504 only)	N/A	N/A
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	N/A
	Regulation A	N/A	N/A
	Rule 504	N/A	N/A
	Total	N/A	N/A
4.a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$0
	Legal Fees	⊠	\$75,000
	Accounting Fees	⊠	\$10,000
	Engineering Fees		\$0
	Sales Commissions (Specify finder's fees separately)		\$0
	Other Expenses (identify):		\$
	Total	_ ⊠	\$85,000

b.	Enter the difference between the aggregate offering price g and total expenses furnished in response to Part C-Question gross proceeds to the issuer."	iven in response to Part C-Question 1 at 4.a. This difference is the "adjusted		×	\$299,915,000
5.	Indicate below the amount of the adjusted gross proceeds used for each of the purposes shown. If the amount for a estimate and check the box to the left of the estimate. The the adjusted gross proceeds to the issuer set forth in respons	any purpose is not known, furnish an otal of the payments listed must equal			
			Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and Fees		□\$ <u>0</u>		<b>S</b> 0
	Purchase of real estate		□\$ <u>0</u>		\$ <u>0</u>
	Purchase, rental or leasing and installation of machiner	y and equipment	<b>\$</b> 0		\$ <u>0</u>
	Construction or leasing of plant buildings and facilities		<b>\$</b> 0		\$ <u>0</u>
	Acquisition of other businesses (including the value of that may be used in exchange for the assets or securitie merger	s of another issuer pursuant to a	□ <b>\$</b> 0		\$0
	Repayment of indebtedness		□ <b>\$</b> 0		<u>so</u>
	Working Capital		□s		S
	Other (specify): investment in securities		<b>∑\$</b> 299,915,000	$\boxtimes$	\$0
	Column Totals		□\$ <u>0</u>		\$
·	Total Payments Listed (column totals added)  D. FEDERA	L SIGNATURE	2	299,915	5,000
the	issuer has duly caused this notice to be signed by the under following signature constitutes an undertaking by the issue tten request of its staff, the information furnished by the issue	to furnish to the U.S. Securities and	Exchange Commission	, upon	
lssi	uer (Print or Type)	Signature	Date	_	. 2008
	dewinds International Equity Portfolio, a portfolio The Tradewinds Institutional Investment Trust	Jus Cutt	3/2	7	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)			
	Jane Crist	Senior Vice Pres, Rout	Tradewinds 6	leba l	Investors LLE
		ENTION			
<u>lnt</u>	entional misstatements or omissions of fact constitute fede	ral criminal violations. (See 18 U.S.C	C. 1001.)		

E. STATE SIGNATURE							
Is any party described in 17 CFR 230.262 presently provisions of such rule?	subject to any of the disqualifica	tionYes No					
See Appendix, Column 5, for state response							
<ol><li>The undersigned issuer hereby undertakes to furnish on Form D (17 CFR 239.500) at such times as requi</li></ol>		y state in which this notice is filed, a notic					
3. The undersigned issuer hereby undertakes to furnish the issuer to offerees.	h to the state administrators, upo	n written request, information furnished b					
4. The undersigned issuer represents that the issuer Uniform Limited Offering Exemption (ULOE) of the availability of this exemption has the burden of	he state in which this notice is fil	ed and understands that the issuer claimin					
The issuer has read this notification and knows the conthe undersigned duly authorized person.	tents to be true and has duly caus	sed this notice to be signed on its behalf b					
Issuer (Print or Type)	Signature	Date					
Tradewinds International Equity Portfolio, a portfolio of The Tradewinds Institutional Investment Trust	Jue aut	March 27, 2008					
Name of Signer (Print or Type)  -iane Crist	Title of Signer (Print or Type)	ent Tradewinds Global					

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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	non-a	d to sell to accredited estors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)				
				Number of Accredited		Number of Nonaccredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AL							ļ <u></u>		
AK		ļ		ļ			ļ		
AZ						_			
AR		×	Portfollo Interests \$300,000,000	1	17,266,907	0	0		x
CA		x	Portfolio Interests \$300,000,000	1	22,000,000	0	0		x
со		x	Portfolio Interests \$300,000,000	2	3,416,660	o	0		x
CT									
DE		×	Portfolio Interests \$300,000,000	1	10,000	0	0		x
DC								1	
FL		x	Portfolio Interests \$300,000,000	1	7,414,986	0	0		x
GA									
н									
ID									
1L									
IN									
1A							<u> </u>		
KS									
KY									
LA		x	Portfolio Interests \$300,000,000	1	60,000,000	0	0		x
MA						<u> </u>			
MD									<u> </u>
ME								-	
	_		D : 44:11					-	
МІ		×	Portfolio Interests \$300,000,000	1	52,877,072	0	0		x

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	non-e inv	d to sell to accredited estors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of Investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No	
MN		x	Portfolio Interests \$300,000,000	1	11,000,000	0	0		x	
			Portfolio Interests		7,000,000		0		x	
МО		X	\$300,000,000  Portfolio Interests	2	7,000,000	0			l l	
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NE							ļ <u> </u>			
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NY		x	Portfolio Interests \$300,000,000	2	21,036,061	0	0		x	
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sc		<del> </del>		-		<del>                                     </del>	-	-	-	
SD	<del> </del>						1		-	
TN		x	Portfolio Interests \$300,000,000	1	3,200,000	0	0		×	
тх		×	Portfolio Interests \$300,000,000	3	24,326,965	0	0		×	
UT	<del>                                     </del>			<del>                                     </del>		<del> </del>	<del>                                     </del>			
VT		<del> </del>						<del> </del>	-	
VA		<del>                                     </del>				- A 1 F		<b> </b>		
WA		<del>                                     </del>			-		<b>)</b>		1	
wv	-									